

ANNUAL STATEMENT

FOR THE YEAR ENDING DECEMBER 31, 2019 OF THE CONDITION AND AFFAIRS OF THE

OF THE CONDITION AND AFFAIRS OF THE
WellCare Health Insurance Company of America

			(Nam	e)					
	01199 , _	01199 (Prior Period)	NAIC Company	/ Code1	6343	Employer's	ID Number	82-4247084	
Organized under the Laws o	f	Arkansas		, State of Do	micile or	Port of Entry	A	rkansas	
Country of Domicile				— United State	es	•			
Licensed as business type:	Life, Accident &	2. Health [X]	Property/Ca	sualty []	Н	nenital Medical	& Dental Serv	ce or Indemnity []	
	•	Corporation []	. ,	ce Corporation		ealth Maintenar		, , ,	
	Other []	Corporation[]		ederally Qualifie			ice Organizatio	[]	
	Other []		10 1 11010, 1 1	cacraily Qualific	.a. 100 [] 140[]			
Incorporated/Organized		01/23/2018	c	ommenced Bus	iness _		01/01/201	9	
Statutory Home Office	124	West Capitol Avenu					ock, AR, US 72		
		(Street and Num	ber)			(City or Town, S	State, Country and 2	ip Code)	
Main Administrative Office				8735 Hend	erson Ro	ad			
	mpa, FL, US 336			Officerani	,	813-206-62			
, ,	vn, State, Country and	d Zip Code)			(A	rea Code) (Telepho	one Number)		
Mail Address		D. Box 31391 d Number or P.O. Box)		_,	(Tampa, FL, U	JS 33631-3391 Country and Zip Co	de)	
Primary Location of Books a	,	,		87	,	lerson Road	,	,	
_			(Street an	nd Number)					
						813-206-62 ode) (Telephone Nu			
Internet Web Site Address				www.wellcar		, , ,	,, ,		
Statutory Statement Contact		Michael Was	ik			813-	3-206-2725		
(Name) michael.wasik@wellcare.com						(Area Code) (Telep 813-675-28	phone Number) (Ext	ension)	
mioriac	(E-Mail Address)	10.0011				(Fax Number			
			OFFIC	EDC					
Name		Title	OFFIC	EKS	Name			Title	
Richard Charles Fisher	r_#,	Interim President a	nd CFO	Michae	el Troy M	eyer,	C	er, VP and Corporate ontroller	
Michael Warren Habe	er . S	Secretary and Vice F	President	Tamm	y Lynn M	ever .		ecretary and Vice resident	
		(OTHER OF	FICERS					
Goran Jankovic	,T	reasurer and Vice F							
Andrew Lynn Asher	·	DIREC Michael Troy Me	CTORS OI	R TRUSTE Richard C		isher #			
State of	Florida								
County of	Hillsborough	ss 							
The officers of this reporting ent above, all of the herein describe that this statement, together will liabilities and of the condition an and have been completed in acc may differ; or, (2) that state rule knowledge and belief, respective when required, that is an exact regulators in lieu of or in addition	ed assets were the th related exhibits and affairs of the sa cordance with the less or regulations re- ely. Furthermore, the copy (except for the	absolute property of schedules and explaid reporting entity as of NAIC Annual Statemer equire differences in re- the scope of this attest formatting differences	the said reporting that in the reporting pent in the reporting pent instructions and reporting not relate tation by the description.	entity, free and contained, annexe riod stated above Accounting Pract to accounting paribed officers also	lear from a d or referre, and of its tices and Fractices are includes	any liens or claim red to, is a full are income and decercian manual procedures manual procedures, act the related corres	s thereon, excep nd true statemen ductions therefron al except to the e ccording to the be sponding electror	t as herein stated, and t of all the assets and n for the period ended, xtent that: (1) state law est of their information, nic filing with the NAIC,	
Richard Charl Interim Preside		Asst. Tre	Michael Tro easurer, VP and		ntroller		Michael Warre		
Subscribed and sworn to bday of	efore me this				b. If no: 1. Sta 2. Da	s an original filinate the amendmente filed mber of pages	nent number	Yes [X] No []	

EXHIBIT 2 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID

1	2	3	4	5	6	7
Name of Debtor	1 - 30 Days	31 - 60 Days	61 - 90 Days	Over 90 Days	Nonadmitted	Admitted
0199999 Total individuals			,			
Group subscribers:						
						ļ
	ļ					
						-
	+					·
	+					·
	·					·
						·
					1	
	1					
0299997 Group subscriber subtotal	10	0	0	0	0	0
0299998 Premiums due and unpaid not individually listed						
0299999 Total group	0	0	0	0	0	0
039999 Premiums due and unpaid from Medicare entities	.5,099	1,131	1,140	8,720		16,090
0299999 Total group						
0599999 Accident and health premiums due and unpaid (Page 2, Line 15)	5,099	1,131	1,140	8,720	0	16,090

EXHIBIT 3 - HEALTH CARE RECEIVABLES

1	2	3	4	5 Over 90 Days	6	7
Name of Debtor	1 - 30 Days	31 - 60 Days	61 - 90 Days	Over 90 Days	Nonadmitted	Admitted
0199998 - Aggregate of amounts not individually listed above.	11,416	•	1,832	•		13,248 13,248
0199999 - Pharmaceutical Rebate Receivables	11,416	0	1,832	0	0	13,248
0299998 - Aggregate of amounts not individually listed above.			119	877	877	119
0199998 - Aggregate of amounts not individually listed above. 0199999 - Pharmaceutical Rebate Receivables 0299998 - Aggregate of amounts not individually listed above. 0299999 - Claim Overpayment Receivables	0	0	119	877	877	119
			ļ			
0799999 Gross Health Care Receivables	11,416	0	1,951	877	877	13,367

EXHIBIT 3A – ANALYSIS OF HEALTH CARE RECEIVABLES COLLECTED AND ACCRUED

EXHIBIT OF AIREIGIO OF TIERETH OFFICE RE						
		eivables Collected		eivables Accrued	5	6
	During	the Year	as of December 3	31 of Current Year		
	1 1	2	3	1 4		Estimated Health
		_			Health Care	Care Receivables
	On Amounts Accrued		On Amounts Accrued		Receivables in	Accrued as of
						December 24 of
	Prior to January 1	On Claims Accrued		On Amounts Accrued		December 31 of
Type of Health Care Receivables	of Current Year	During the Year	Prior Year	During the Year	(Columns 1 + 3)	Prior Year
Pharmaceutical rebate receivables	0	37.893	0	13.248	0	0
		, , , , , , , , , , , , , , , , , , , ,				
O Object on a section of the				996	0	
Claim overpayment receivables		0	ļ	990	υ	J0
Loans and advances to providers		1			0	
·	i					
Capitation arrangement receivables					0	
4. Capitation arrangement receivables		 	 	<u> </u>		
Risk sharing receivables			L		0	
				[
Other health care receivables					0	
5. Other floating out of footballoo		†	†	†		İ
		07.000		14 044		
7. Totals (Lines 1 through 6)	1 0	37,893	1 0	14,244	0	1 0

Note that the accrued amounts in Columns 3, 4 and 6 are the total health care receivables, not just the admitted portion.

EXHIBIT 4 – CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims								
1	2	3	4	5	6	7		
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total		
Claims Unpaid (Reported)								
0199999 Individually listed claims unpaid		0	0	0	0			
0299999 Aggregate accounts not individually listed-uncovered	4 620	2 270	4 424		1 250	14 24		
0399999 Aggregate accounts not individually listed-covered	4,639	2,378	1,424	4,445	1,359	14,24		
0499999 Subtotals	4,639	2,378	1,424	4,445	1,359	14,24		
0599999 Unreported claims and other claim reserves						94,818		
0699999 Total amounts withheld						400.00		
0799999 Total claims unpaid						109,063		
0899999 Accrued medical incentive pool and bonus amounts						1,608		

EXHIBIT 5 - AMOUNTS DUE FROM PARENT, SUBSIDIARIES AND AFFILIATES

1	2	3	4	5	6	Adm	itted
						7	8
Name of Affiliate	1 - 30 Days	31 - 60 Days	61 - 90 Days	Over 90 Days	Nonadmitted	Current	Non-Current
Comprehensive Health Management, Inc	1,437	-				1,437	
WellCare Health Plans, Inc	4,570				4,570		
							
							.
0400000 ladicida alla lista di associa la la	6.007	ļ	ļ	ł	4.570	1.437	ļ
0199999 Individually listed receivables		L	μυ	J	4,570	1,437	۱
0299999 Receivables not individually listed	0.007	0	0		4 570	1 407	0
0399999 Total gross amounts receivable	6,007	0	0	1 0	4,570	1,437	J 0

EXHIBIT 6 - AMOUNTS DUE TO PARENT, SUBSIDIARIES AND AFFILIATES

1	2	3	4	5
Affiliate	Description	Amount	Current	Non-Current
		^	0	
0199999 Individually listed payables			0	U
0399999 Total gross payables		0	0	0

EXHIBIT 7 - PART 1- SUMMARY OF TRANSACTIONS WITH PROVIDERS

Payment Method	1 Direct Medical Expense Payment	2 Column 1 as a % of Total Payments	3 Total Members Covered	4 Column 3 as a % of Total Members	5 Column 1 Expenses Paid to Affiliated Providers	6 Column 1 Expenses Paid to Non-Affiliated Providers
Capitation Payments:						
1. Medical groups	8,706	1.6	86	100.0		8,706
2. Intermediaries	0	0.0		0.0		
3. All other providers	0	0.0		0.0		
4. Total capitation payments	8,706	1.6	86	100.0	0	8,706
Other Payments:						
5. Fee-for-service		0.0	XXX	xxx		
Contractual fee payments	521,981	98 . 1	XXX	xxx		521,981
Bonus/withhold arrangements - fee-for-service	0	0.0	XXX	xxx		
Bonus/withhold arrangements - contractual fee payments	1,320	0.2	XXX	xxx		. 1,320
9. Non-contingent salaries	0	0.0	xxx	Lxxx		
10. Aggregate cost arrangements		0.0	xxx	Lxxx		
11. All other payments	0	0.0	xxx	Lxxx		<u> </u>
12. Total other payments	523,301	98.4	XXX	xxx	0	523,301
13. Total (Line 4 plus Line 12)	532,007	100 %	XXX	XXX	0	532,007

EXHIBIT 7 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES

EARIBIT 7 - PART 2 - SUMMART OF TRANSACTIONS WITH INTERMEDIARIES										
1	2	3	4 Average Monthly Capitation	5 Intermediary's Total Adjusted Capital	6 Intermediary's Authorized					
NAIC Code	Name of Intermediary	Capitation Paid	Capitation	Total Adjusted Capital	Control Level RBC					
9999999 Totals			XXX	XXX	xxx					

EXHIBIT 8 – FURNITURE, EQUIPMENT AND SUPPLIES OWNED

	1	2	3	4	5	6
Description	Cost	Improvements	Accumulated Depreciation	Book Value Less Encumbrances	Assets Not Admitted	Net Admitted Assets
Administrative furniture and equipment						
2. Medical furniture, equipment and fixtures						
3. Pharmaceuticals and surgical supplies						
4. Durable medical equipment						
Other property and equipment Total	0	0	0	0	0	0



EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

WellCare Health Insurance Company of America

2.

								(LOCATION)		
NAIC Group Code 01199 BUSINESS IN THE STATE OF	F Arkansas			DURING THE YEAR		1			IC Company Code	16343
	1	Compre (Hospital	ehensive & Medical)	4	5	6	7	8	9	10
	Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year	0							0		
2 First Quarter	63							63		
3 Second Quarter	72							72		
4. Third Quarter	81							81		
5. Current Year	86							86		
6 Current Year Member Months	892							892		
Total Member Ambulatory Encounters for Year:										
7. Physician	980							980		
8. Non-Physician	304							304		
9. Total	1,284	0	0	0	0	0	0	1,284	0	
10. Hospital Patient Days Incurred	193							193		
11. Number of Inpatient Admissions	38							38		
12. Health Premiums Written (b)	799,691							799,691		
13. Life Premiums Direct	0									
14. Property/Casualty Premiums Written	0									
15. Health Premiums Earned								799,691		
16. Property/Casualty Premiums Earned	0									
17. Amount Paid for Provision of Health Care Services	532,007							532,007		
18. Amount Incurred for Provision of Health Care Services	628,433							628,433		

⁽a) For health business: number of persons insured under PPO managed care products ______86 and number of persons insured under indemnity only products ______86

⁽b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$799,691

628.433

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE WellCare Health Insurance Company of America

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

WellCare Health Insurance Company of America

(LOCATION) **DURING THE YEAR 2019** NAIC Company Code NAIC Group Code BUSINESS IN THE STATE OF Consolidated 16343 01199 Comprehensive (Hospital & Medical) Federal **Employees** Medicare Vision Dental Health Benefit Title XVIII Title XIX Total Individual Group Only Only Plan Medicare Medicaid Other Supplement Total Members at end of: Prior Year 63 63 2 First Quarter ..72 3 Second Quarter ...81 ..81 4. Third Quarter 86 86 Current Year 892 0 0 0 n 0 892 6 Current Year Member Months Total Member Ambulatory Encounters for Year: ..980 .980 7. Physician 304 304 8. Non-Physician 9. Total 1,284 0 1,284 0 193 0 0 0 0 0 193 10. Hospital Patient Days Incurred 0 38 38 0 11. Number of Inpatient Admissions .799,691 .799,691 12. Health Premiums Written (b). 13. Life Premiums Direct 14. Property/Casualty Premiums Written .799,691 .799,691 15. Health Premiums Earned. 16. Property/Casualty Premiums Earned 0 .532.007 ...0 .532.007 17. Amount Paid for Provision of Health Care Services

(a) For health business: number of persons insured under PPO managed care products	
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628.433

18. Amount Incurred for Provision of Health Care Services

Schedule S - Part 1 - Section 2

Schedule S - Part 2

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SCHEDULE S - PART 3 - SECTION 2

Dainauranaa Cadad Aasidant and Haal	th Incurance Lieted by Deineuring	Company as of December 31, Current Year

			. Re	insurance Ceded /	Accident and near	in mourance Liste	a by Reinsuring Con	ipany as or Decenii	per 31, Current rear				
1	2	3	4	5	6	7	8	9	10	Outstanding :	Surplus Relief	13	14
NAIC			Name		Type of	Type of		Unearned	Reserve Credit	11	12	Modified	
Company	ID	Effective	of	Domiciliary	Reinsurance	Business			Taken Other than for			Coinsurance	Funds Withheld
Code	Number	Date	Company	Jurisdiction	Ceded	Ceded	Premiums		Unearned Premiums	Current Year	Prior Year		Under Coinsurance
General Ac			es - U.S. Non-Affiliates	- ourisalction	Ocucu	Ocucu	1 Territariis	(Estimated)	Joneanica i remianis	Ouricili rear	i noi reai	11030170	Orider Comparance
11835			PARTNERRE AMER INS CO	DE	SSL / I	I MR	35	ı					
			Ion-Affiliates - U.S. Non-Affiliates	DE	ಖ.L/ I					Λ	Λ	Λ	
							35	0	0	0	U	0	0
1099999	- General Account	- Authorized - N	lon-Affiliates - Total Authorized Non-Affiliates				35	0	0	0	0	0	0
			otal General Account Authorized				35		0	0	0	0	0
3499999	- General Account	- lotal General	Account Authorized, Unauthorized and Certified				35	0	0	0	0	0	0
6999999	- Total U.S. (Sum	of 0399999, 0899	999, 1499999, 1999999, 2599999, 3099999, 3799999	<u>, 4299999, 4899999, </u>	5399999, 5999999 and	6499999)	35	0	0	0	0	0	0
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9999999	7 Totals						35	0	0	0	0	0	0

Schedule S - Part 4

Schedule S - Part 5

SCHEDULE S - PART 6

Five-Year Exhibit of Reinsurance Ceded Business (\$000 Omitted)

			Omitted)		1 4	
		1 2019	2 2018	3 2017	4 2016	5 2015
Δ.	OPERATIONS ITEMS					
Α. \	DERATIONS HEWS					
1.	Premiums	0	0	0	0	0
2.	Title XVIII-Medicare			0	0	0
3.	Title XIX-Medicaid				0	0
٥.	Commissions and reinsurance expense allowance					0
4.						
5.	Total hospital and medical expenses		0	0	0	0
В. І	BALANCE SHEET ITEMS					
6.	Premiums receivable		0	0	0	0
7.	Claims payable		0	0	0	0
8.	Reinsurance recoverable on paid losses	0	0	0	0	0
9.	Experience rating refunds due or unpaid		0	0	0	0
10.	Commissions and reinsurance expense allowances due.		0	0	0	0
11.	Unauthorized reinsurance offset	0	0	0	0	0
12.	Offset for reinsurance with Certified Reinsurers	0	0			0
	JNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
12	Funds deposited by and withheld from (F)	0	0	0	0	0
	Letters of credit (L).			0	0	
				0		
	Trust agreements (T)	0	0	0	0	J
16.	Other (O)	[0 	0	0	0	0
	REINSURANCE WITH CERTIFIED REINSURERS					
(DEPOSITS BY AND FUNDS WITHHELD FROM)					
17.	Multiple Beneficiary Trust	0	0	0	0	0
18.	Funds deposited by and withheld from (F)			0	0	0
19.	Letters of credit (L)					0
20.	Trust agreements (T)			0		J0
21.	Other (O)	0	0	0	0	0

SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit For Ceded Reinsurance

		1	2	3
		As Reported (net of ceded)	Restatement Adjustments	Restated (gross of ceded)
	ASSETS (Page 2, Col. 3)			
1.	Cash and invested assets (Line 12)	3,345,173		3,345,173
2.	Accident and health premiums due and unpaid (Line 15)	16,090		16,090
3.	Amounts recoverable from reinsurers (Line 16.1)	0		0
4.	Net credit for ceded reinsurance	xxx	0	0
5.	All other admitted assets (Balance)	29,418		29,418
6.	Total assets (Line 28)	3,390,681	0	3,390,681
	LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
7.	Claims unpaid (Line 1)	109,063	0	109,063
8.	Accrued medical incentive pool and bonus payments (Line 2)	1,608		1,608
9.	Premiums received in advance (Line 8)	0		0
10.	Funds held under reinsurance treaties with authorized and unauthorized reinsurers (Line 19, first inset amount plus second inset amount).	0		0
11.				
12.				0
13.				
14.				70,802
15.	Total liabilities (Line 24)		0	181,473
16.			xxx	3,209,208
17.	Total liabilities, capital and surplus (Line 34)	3,390,681	0	3,390,681
	NET CREDIT FOR CEDED REINSURANCE			
18.	Claims unpaid	0		
19.	Accrued medical incentive pool	0		
20.	Premiums received in advance	0		
21.	Reinsurance recoverable on paid losses	0		
22.	Other ceded reinsurance recoverables	0		
23.	Total ceded reinsurance recoverables	0		
24.	Premiums receivable	0		
25.	Funds held under reinsurance treaties with authorized and unauthorized reinsurers	0		
26.	Unauthorized reinsurance	0		
27.	Reinsurance with Certified Reinsurers.	0		
28.	Funds held under reinsurance treaties with Certified Reinsurers	0		
29.	Other ceded reinsurance payables/offsets	0		
30.	Total ceded reinsurance payables/offsets	0		
31.	Total net credit for ceded reinsurance	0		

SCHEDULE T – PART 2 INTERSTATE COMPACT – EXHIBIT OF PREMIUMS WRITTEN Allocated By States and Territories

			ted By States and Territ	Direct Bus	siness Only		
		1 Life (Group and	2 Annuities (Group	3 Disability Income	4 Long-Term Care	5	6
States, Etc.		Individual)	and Individual)	(Group and Individual)	(Group and Individual)	Deposit-Type Contracts	Totals
1. Alabama	AL						
2. Alaska	AK						
3. Arizona	AZ						
4. Arkansas	AR						
5. California	CA						
6. Colorado	co						
7. Connecticut	CT						
8. Delaware	DE						
9. District of Columbia	DC						
10. Florida	FL						
11. Georgia	GA						
12. Hawaii	HI						
13. Idaho	ID						
14. Illinois	IL						
15. Indiana	JN						
16. lowa	JA						
17. Kansas	KS						
18. Kentucky	KY						
19. Louisiana	ľ						
19. Louisiana 20. Maine			l				
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21. Maryland							
22. Massachusetts							
23. Michigan							
24. Minnesota			l				
25. Mississippi							
26. Missouri			<i>₩</i> }-}- -	L			
27. Montana	TM		 { - - - - - - - - - - - 				
28. Nebraska			∤ ╲ ┈┃┈┃┈┃	L _			
29. Nevada	NV	U U					
30. New Hampshire	NH						
31. New Jersey	NJ						
32. New Mexico	MM						
33. New York	NY						
34. North Carolina	NC						
35. North Dakota	ND						
36. Ohio	OH						
37. Oklahoma							
38. Oregon	OR						
39. Pennsylvania							
40. Rhode Island			l				
41. South Carolina			İ		1		
	SD		l	·····	†		
42. South Dakota					·		
43. Tennessee	TN						
14. Texas	TX		·		·		
45. Utah			<u> </u>		·		
46. Vermont	VT				-		
47. Virginia			ļ				
48. Washington							
19. West Virginia							
50. Wisconsin					.		
51. Wyoming	WY						
52. American Samoa	AS						
53. Guam							
54. Puerto Rico							
55. US Virgin Islands							
56. Northern Mariana Islands				!			
57. Canada							
58. Aggregate Other Alien							
		0	0	0	0	0	

1	2	3	4	5	6	7 Name of Securities	8	9	10	11	12 Type of Control (Ownership.	13	14	15	16
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management.	Ownership		Filing	
Group		Company	ID	Federal		Traded (U.S. or	Parent, Subsidiaries	Domiciliary		Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Entity(ies)/Person(s)	(Y/N)	*
													WellCare Health	ll	
01199	WellCare Health Plans Inc	95310	06 - 1405640				WellCare of Connecticut Inc	CT		WellCare of New York, Inc	Ownership	100.0	Plans, Inc.	N	0
01100	WallCare Health Diana Inc	95081	59-2583622					FL	l IA	The WellCare Management	Ownership	100.0	WellCare Health Plans, Inc	N	0
01199	WellCare Health Plans Inc	90001	09 - 2000022	-			Comprehensive Health Management	ГL	I A	Group, IncThe WellCare Management	ownership	100.0	WellCare Health	JJN	
01199	 WellCare Health Plans Inc	00000	59-3547616				Inc]FL	NIA	Group, Inc	Ownership	100.0	Plans. Inc.	N	0
01100	merroare nearth rans me	00000	00-00-7010				The WellCare Management Group,			oroup, mo	Owner 3111 P	1100.0	WellCare Health		
01199	WellCare Health Plans Inc.	00000	14-1647239				Inc.	NY	UDP	WCG Health Management, Inc	Ownership.	100.0	Plans, Inc.	N	0
		İ						1		The WellCare Management			WellCare Health		
01199	WellCare Health Plans Inc	95534	14-1676443				WellCare of New York Inc	NY	I A	Group, Inc	Ownership	100.0	Plans, Inc.	N	0
										The WellCare Management			WellCare Health		
01199	WellCare Health Plans Inc	00000	20-3320236				Harmony Behavioral Health Inc	FL	NIA	Group, Inc	Ownership	100.0	Plans, Inc	N	0
04400	WallCare Haalth Dlage Inc	11000	36-4050495				Harmany Haalah Dian Inc	l IL		Harmany Haalah Cyatama Ina	O	100.0	WellCare Health		0
01199	WellCare Health Plans Inc	11229	30-4030493				Harmony Health Plan Inc	IL	I A	Harmony Health Systems, Inc The WellCare Management	Ownership	100.0	Plans, Inc WellCare Health	JN	
01199		00000	22-3391045				Harmony Health Systems Inc	l IL	NIA	Group, Inc	Ownership	100.0	Plans. Inc.	N	0
01133	The rodre rearth rans me	00000	22-0001040				That more recartly by stonia the			oroup, mo	O#11013111P	1100.0	WellCare Health		
01199	WellCare Health Plans Inc	00000	36-4467676				Harmony Health Management Inc	lIL.	NIA	Harmony Health Systems, Inc	Ownership	100.0	Plans, Inc	N	0
01199	WellCare Health Plans Inc		47 - 0937650		0001279363	NYSE	WellCare Health Plans Inc	FL	UIP	Shareholders		0.0		N	0
		i i											WellCare Health		
01199	WellCare Health Plans Inc	00000	04-3669698				WCG Health Management Inc	FL	UIP		Ownership	100.0	Plans, Inc	N	0
		40700							l	The WellCare Management			WellCare Health	ll	
01199	WellCare Health Plans Inc	10760	20-2103320				WellCare of Georgia Inc	GA	I A	Group, Inc.	Ownership	100.0	Plans, Inc.	N	0
01199	 WellCare Health Plans Inc	00000	98-0448921				Comprehensive Reinsurance Ltd	CYM	IA	The WellCare Management Group, Inc.	Ownership	100.0	WellCare Health Plans. Inc.	l N	0
01199	l well care nearth Flans Inc	00000	90-0440921	-			WellCare Prescription Insurance	UTIWI	I A	The WellCare Management	Ownership	100.0	WellCare Health]JN	
01199	WellCare Health Plans Inc	10155	20-2383134				Inc.	FL	IA	Group, Inc	Ownership	100 0	Plans. Inc	N	0
01100	The Fredrick Floar (III France Floar Constitution of the Constitut	10100	20 2000 10 1				1110			The WellCare Management	0 #1101 0111 p		WellCare Health		
01199	WellCare Health Plans Inc	12749	20-3562146				WellCare of Ohio Inc	0H	I A	Group, Inc.	Ownership	100.0	Plans, Inc	N	0
		İ					Harmony Behavioral Health IPA			Harmony Behavioral Health,	· ·		WellCare Health		
01199	WellCare Health Plans Inc	00000	20-3262322				Inc.	NY	NIA	Inc.	Ownership	100.0	Plans, Inc	N	0
04400	WallOana Haalth Blana laa	00000	00 4000074				WellCare Pharmacy Benefits	DE		The WellCare Management	Owner and his	400.0	WellCare Health	١.,	
01199	WellCare Health Plans Inc	00000	20-4869374	-	-		Management In WellCare Health Insurance of	DE	NIA	Group, IncThe WellCare Management	Ownership	1100.0	Plans, Inc WellCare Health	N	
01199	 WellCare Health Plans Inc	83445	86-0269558				Arizona Inc.	AZ	I A	Group, Inc	Ownership	100 0	Plans. Inc	M	0
01133		00440	00-0203030				WellCare Health Insurance			The WellCare Management	Owner 2111h	100.0	WellCare Health	JJN	
01199	WellCare Health Plans Inc	64467	36-6069295				Company of Kentucky Inc	КҮ	IA	Group. Inc.	Ownership	100 0	Plans. Inc.	N	0
							WellCare Health Insurance of			The WellCare Management			WellCare Health		
01199	WellCare Health Plans Inc	10884	11-3197523				New York Inc.	NY	IA	Group. Inc.	Ownership	100.0	Plans, Inc.	N	0
							WellCare Health Plans of New		[The WellCare Management			WellCare Health		
01199	WellCare Health Plans Inc	13020	20-8017319				Jersey Inc	NJ		Group, Inc	Ownership	100.0	Plans, Inc	N	0
04460	W 110 11 111 51 1	4000 /	00 0050704				W 110 C T	T./	[The WellCare Management			WellCare Health		
01199	WellCare Health Plans Inc	12964	20-8058761	-	-		WellCare of Texas Inc	TX	I A	Group, Inc.	Ownership	1100.0	Plans, Inc	N	0
01199	 WellCare Health Plans Inc.	00000	20-8420512				Exactus Pharmacy Solutions,	DE	NIA	WellCare Pharmacy Benefits Management	Ownership	100.0	WellCare Health Plans. Inc.	N.	0
01199	NETIONIE NEMILII FIMIS IIIC	00000	ZU •04ZUU IZ	-	-		1110	₽⊑	N I A	The WellCare Management	Ownership	100.0	WellCare Health	JJN	
01199	WellCare Health Plans Inc.	00000	27 - 0386122				Ohana Health Plans. Inc.	HI	I A		Ownership.	100 0	Plans, Inc.	N	0
	1			-1	1		4	1	4	1	I	1	1	1	

								,							
1	2	3	4	5	6	7 Name of Securities	8	9	10	11	12 Type of Control (Ownership,	13	14	15	16
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group		Company	ID	Federal		Traded (U.S. or	Parent, Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	Location	Entity	(Name of Entity/Person)		Percentage	Entity(ies)/Person(s)	(Y/N)	*
							WellCare Health Plans of			The WellCare Management			WellCare Health		
01199	WellCare Health Plans Inc	00000	27 - 4293249	.			California, Inc.	CA	IA	Group, Inc.	Ownership	100.0	Plans, Inc	N	,0
01100	WallCare Health Diene Inc	14404	45-3617189					KS	l IA	The WellCare Management	Ownership	100.0	WellCare Health Plans, Inc.	N.	
01199	WellCare Health Plans Inc	. 14404	43-3017 109	-			WellCare Health Plans of	No	I A	Group, IncThe WellCare Management	l ownership	100.0	WellCare Health	JN	
01199	 WellCare Health Plans Inc	16533	45-5154364				Tennessee. Inc.	TN	I A	Group, Inc	Ownership	100 0	Plans, Inc	N	ا ۱
01100	The Frodre Floar the France Floar the	. 10000	10 0101001				America's 1st Choice California			The WellCare Management	0 #1101 3111 p		WellCare Health		
01199	WellCare Health Plans Inc.	000004	45-3236788				Holdings, LLC	FL	NIA	Group, Inc.	Ownership	100.0	Plans, Inc.	N	0
										America's 1st Choice	i i		WellCare Health		
01199	WellCare Health Plans Inc	. 00000 2	20 - 5327501				WellCare of California, Inc	CA	I A	California Holdings, LLC	Ownership	100.0	Plans, Inc	N	,0
04400	W 110 11 111 B1	44775	00 0000000				WellCare of South Carolina,	00		The WellCare Management		400.0	WellCare Health		
01199	WellCare Health Plans Inc	11775	32-0062883	-			. Inc	SC	I A	Group, IncThe WellCare Management	Ownership	100.0	Plans, Inc WellCare Health	N	,0
01199	 WellCare Health Plans Inc	12913	20-5862801				Missouri Care, Incorporated	MO	I A	Group, Inc.	Ownership	100.0	Plans. Inc.	N	ا ۱
01133		. 12313	20-3002001				The WellCare Community	JviO		Toroup, mc	Owner Sirrp	100.0	WellCare Health		
01199	WellCare Health Plans Inc.	00000	27 - 4212954				Foundation	DE	NIA	WellCare Health Plans, Inc	Ownership	100.0	Plans, Inc.	l N	. 0
										The WellCare Management			WellCare Health		
01199	WellCare Health Plans Inc	. 00000	62 - 1832645				Windsor Health Group, Inc	TN	NIA	Group, Inc	Ownership	100.0	Plans, Inc	N	0
		l					WellCare Health Plans of			The WellCare Management			WellCare Health		
01199	WellCare Health Plans Inc	. 15510	47 - 0971481				Kentucky, Inc	KY	I A	Group, Inc	Ownership	100.0	Plans, Inc	N	0
01199	 WellCare Health Plans Inc	15951	47 - 5456872				 WellCare of Nebraska, Inc.	NE NE	l IA	The WellCare Management Group, Inc.	Ownership	100.0	WellCare Health Plans. Inc	N.	
01199	wellcare nearth Flans IIIc	. 10901	47 -0400072	-			wellcare of Nebraska, Inc]JN⊏		The WellCare Management	Ownersiiip	100.0	WellCare Health	JN	
01199	WellCare Health Plans Inc.	00000	81-1631920				WellCare of Pennsylvania, Inc	PA	IA	Group Inc	Ownership	100 0	Plans, Inc.	l N	0
01100	The rear of rear time rearrants		0							The WellCare Management	· · · · · · · · · · · · · · · · · · ·		WellCare Health		
01199	WellCare Health Plans Inc	16117	81-3299281				WellCare of Oklahoma, Inc	0K	I A	Group. Inc.	Ownership	100.0	Plans, Inc	N	0
1		1					One Care by Care 1st Health			The WellCare Management			WellCare Health		
01199	WellCare Health Plans Inc	. 00000	06 - 1742685				Plan of Arizona, Inc	AZ	I A	Group, Inc	Ownership	100.0	Plans, Inc	N	0
01199	 WellCare Health Plans Inc	00000	57 - 1165217				Care 1st Health Plan Arizona,	AZ	1.4	The WellCare Management Group, Inc.	Ownership	100.0	WellCare Health Plans, Inc	N.	
01199	wellcare nearth Flans IIIc	. 000000	37 - 1 1032 17	-			Care 1st Health Plan			Care 1st Health Plan Arizona.	Ownersiiip	100.0	WellCare Health	JN	
01199	WellCare Health Plans Inc.	00000	46 - 2680 154				Administrative Services, Inc.	AZ	NIA	Inc.	Ownership	100 0	Plans. Inc.	l N	0
										The WellCare Management			WellCare Health		1
01199	WellCare Health Plans Inc	16329	81-5442932				WellCare of Mississippi, Inc	MS	I A	Group, Inc	Ownership	100.0	Plans, Inc.	N	0
		1								The WellCare Management			WellCare Health		
01199	WellCare Health Plans Inc	. 00000 8	82-0664467				WellCare of Virginia, Inc	VA	I A	Group, Inc	Ownership	100.0	Plans, Inc	N	0
01100	WallCare Health Diene Inc	16000	82-1301128				WollCare of Alabama Inc	Al	l IA	The WellCare Management	Ownorobin	100.0	WellCare Health	N.	
01199	WellCare Health Plans Inc	16239	02-1301128	-			WellCare of Alabama, Inc Accountable Care Coalition of	AL	I A	Group, Inc Collaborative Health Systems	Ownership	100.0	Plans, Inc WellCare Health	N	,
01199	WellCare Health Plans Inc.	00000	82-1246845				Arizona. LLC	AZ	NIA	ILLC	Ownership.	51.0	Plans, Inc.	N	ا ۱
1100			0_ 1_10010				Accountable Care Coalition of			Collaborative Health Systems	p		WellCare Health		
01199	WellCare Health Plans Inc	000004	45 - 55 10 25 1				Central Georgia, LLC	GA	NIA	LLC	Ownership	51.0	Plans, Inc	N	,
							Accountable Care Coalition of			Collaborative Health Systems,	·		WellCare Health		.
01199	WellCare Health Plans Inc	00000	81-2588974				Chesapeake, LLC	MD	NIA	LLC.	Ownership	100.0	Plans, Inc	N	0
01100	WellCore Health Blazz Lzz	00000	82-1681146				Accountable Care Coalition of	TV	NI A	Collaborative Health Systems	Owno robi -	F4 0	WellCare Health		, ,
01199	WellCare Health Plans Inc	00000	0∠-1001140				Community Health Centers, LLC	TX	NIA	[LL6	Ownership	U.I.G	Plans, Inc	N	U

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
						Name of Securities					Type of Control (Ownership,				
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group		Company	ID	Federal		Traded (U.S. or	Parent, Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Entity(ies)/Person(s)	(Y/N)	*
							Accountable Care Coalition of						W 110 11 111		
01199	WellCare Health Plans Inc.	00000	82-1669422				Community Health Centers II,	TX	NIA	Collaborative Health Systems	Ownership	100.0	WellCare Health Plans. Inc.	M	0
01199	Wellcare Health Flans Inc	00000	02-1009422				Accountable Care Coalition of	/ A	N I A	Collaborative Health Systems	. Ownersinp	100.0	WellCare Health	JN	
01199	WellCare Health Plans Inc	00000	45-4537668				DeKalb. LLC	GA	NIA	LLC	Ownership	80.0	Plans. Inc	N	0
01100	norrouro nourem rano mo						Accountable Care Coalition of		1	Collaborative Health Systems	. o #1101 0111 p		WellCare Health		
01199	WellCare Health Plans Inc	00000	45-5481108				Georgia, LLC	GA	NIA	LLC	.Ownership	51.0	Plans, Inc	N	0
							Accountable Care Coalition of			Collaborative Health Systems	l		WellCare Health		
01199	WellCare Health Plans Inc	00000	82-1623920				Southeast Partners, LLC	GA	NIA	Callabarativa Haalth Contant	Ownership	100.0	Plans, Inc.	N	0
01199	WellCare Health Plans Inc.	00000	82-1558080				Accountable Care Coalition of Hawaii, LLC	Н	NIA	Collaborative Health Systems	Ownership	100.0	WellCare Health Plans. Inc	N	0
01199	Wellcare Hearth Flans IIIc	00000	02-1330000				Accountable Care Coalition of		N I A	Collaborative Health Systems	. Owner sirrp	100.0	WellCare Health	N	
01199	WellCare Health Plans Inc.	00000	45-5449147				Maryland Primary Care, LLC	MD	NIA	LLC	Ownership	51.0	Plans, Inc	N	0
							Accountable Care Coalition of			Collaborative Health Systems			WellCare Health		
01199	WellCare Health Plans Inc	00000	45-4119739				Maryland, LLC	MD	NIA	LLC.	Ownership	51.0	Plans, Inc	N	0
04400	Wall Oars Haal Na Diana Isa	00000	40, 0004400				Accountable Care Coalition of		NII A	Collaborative Health Systems	O	F4 0	WellCare Health		
01199	WellCare Health Plans Inc	00000	46-2881180				Mississippi, LLCAccountable Care Coalition of	MS	NIA	Collaborative Health Systems	Ownership	51.0	Plans, Inc WellCare Health	N	
01199	WellCare Health Plans Inc	00000	45-4105836				Mount Kisco. LLC	NY	NIA	LLC	Ownership	51.0	Plans. Inc	N	0
01100	WOTTOUTO TIOUTETT TRAIS THO	00000	40 4100000				Accountable Care Coalition of		1	Collaborative Health Systems	. O #1101 5111 p		WellCare Health		
01199	WellCare Health Plans Inc	00000	82-1263227				New Jersey, LLC.	NJ	NIA	LLC	Ownership	51.0	Plans, Inc	N	0
							Accountable Care Coalition of		l	Collaborative Health Systems			WellCare Health	ll	
01199	WellCare Health Plans Inc	00000	45-4552802				North Texas, LLC	TX	NIA	LLC	Ownership	51.0	Plans, Inc.	N	0
01199	WellCare Health Plans Inc.	00000	47 - 3894436				Accountable Care Coalition of Northeast Georgia, LLC	GA	NIA	Collaborative Health Systems,	Ownership	51.0	WellCare Health Plans, Inc	N	0
01133	"erroare nearth rians inc	00000	47 -3034430				Accountable Care Coalition of	U/\	NI/^	Collaborative Health Systems	. Owner strip		WellCare Health		
01199	WellCare Health Plans Inc	00000	45-4106526				Northwest Florida, LLC	FL	NIA	LLC	Ownership	51.0	Plans, Inc	N	0
							Accountable Care Coalition of			Collaborative Health Systems	'		WellCare Health		
01199	WellCare Health Plans Inc	00000	82-1604548				North West Region, LLC	OR	NIA	LLC	.Ownership	100.0	Plans, Inc	N	0
01199	WellCare Health Plans Inc.	00000	82-1698885				Accountable Care Coalition of North West Region II, LLC	0R	NIA	Collaborative Health Systems	Ownership	100.0	WellCare Health Plans. Inc.	N	0
01199	Wellcare Health Flans Inc	00000	02-1090000				Accountable Care Coalition of	UN	N I A	Collaborative Health Systems	. Ownership	100.0	WellCare Health	JN	
01199	WellCare Health Plans Inc.	00000	82-0727997				Northeast Partners. LLC	PA	NIA	LLC	Ownership.	100.0	Plans. Inc.	N	0
							Accountable Care Coalition of		1	Collaborative Health Systems,			WellCare Health		
01199	WellCare Health Plans Inc	00000	47 - 3913308				South Carolina, LLC	SC	NIA	LLC.	Ownership	100.0	Plans, Inc	N	0
04400	Wall Oars Haal Na Diana las	00000	47 0040550				Accountable Care Coalition of	TV		Collaborative Health Systems,	O	400.0	WellCare Health		
01199	WellCare Health Plans Inc	00000	47 - 3843552				Southeast Texas, Inc Accountable Care Coalition of	TX	NIA	Collaborative Health Systems	Ownership	100 . 0	Plans, Inc WellCare Health	N	
01199	WellCare Health Plans Inc.	00000	45-4113610				Southeast Wisconsin	w ı	NIA	Collaborative Health Systems	Ownership.	51.0	Plans. Inc.	N	0
01100	"orroard floarth Frans floar	00000	40 4110010				Accountable Care Coalition of			Collaborative Health Systems	. O #1101 5111 P		WellCare Health		
01199	WellCare Health Plans Inc	00000	45-4546234				Syracuse, LLC	NY	NIA	LLC	Ownership	51.0	Plans, Inc	N	0
							Accountable Care Coalition of			Collaborative Health Systems			WellCare Health		
01199	WellCare Health Plans Inc	00000	82-1219279	-			Tennessee, LLC	TN	NIA	LLC	.Ownership	51.0	Plans, Inc	N	0
01199	WellCare Health Plans Inc.	00000	45-2742298				Accountable Care Coalition of Texas. Inc.	TX	NIA	Collaborative Health Systems	Ownership	100.0	WellCare Health Plans, Inc	NI	0
01188	יים וויסמול וולמונוו רומוול ווול	00000	4J*Z14ZZ30				American Progressive Life &	1 ^	IN I H	LLU	. Owner surp	100.0	1 10115, 1116	N	υ
							Health Insurance Company of New			Universal American Holdings,			WellCare Health		
01199	WellCare Health Plans Inc	80624	13-1851754				York	NY	I A	LLC	Ownership	100.0	Plans, Inc	N	0

1 2 Group Code Group Name	NAIC Compan Code	ıy ID	5	6	Name of	8		10	11	12 Type of Control	13	14	15	16
Code Group Name	Compan	N ID			0					I Type of Control			1	
Code Group Name	Compan	ny ID			Securities					(Ownership,				
Code Group Name	Compan	ID			Exchange if			Relationship		Board,	If Control is		Is an SCA	
Code Group Name			Federal		Publicly	Names of Parent, Subsidiaries	Domiciliary	to Reporting	Directly Controlled by	Management,	Ownership Provide	Ultimate Controlling	Filing Required?	
	Code		RSSD	CIK	Traded (U.S. or International)	Or Affiliates	Location	Entity	(Name of Entity/Person)	Attorney-in-Fact,		Entity(ies)/Person(s)		*
		Number	ROOD	OIIC	international)	Of Affiliates	Location	Littly	(Name of Entity/Ferson)	miliderice, Other)	rercentage	WellCare Health	(1/11)	
01199WellCare Health Plans	Inc 00000	52-2134236				APS Healthcare Holdings, Inc	DE	NIA	APS Healthcare, Inc.	Ownership	100.0	Plans, Inc.	N	0
										·		WellCare Health		
01199WellCare Health Plans	Inc 00000	54 - 1602622				APS Healthcare, Inc	DE	NIA	UAM/APS Holding Corp	Ownership	100.0	Plans, Inc.	. N	0
01199WellCare Health Plans	nc	45-4644722				IAPS Parent . Inc	DE	NIA	Universal American Holdings, IIC	Ownership	100.0	WellCare Health Plans. Inc	N	0
01199WellCare Health Plans	5 IIIC	43-4044722				IAPS Parent, Inc	DE	N I A	LLU	Ownership	100.0	WellCare Health		
01199 WellCare Health Plans	Inc. 00000	30-0803845				Chrysalis Medical Services, LLC	TX	NIA	Heritage Health Systems, Inc.,	Ownership.	51.0	Plans. Inc.	N	0
						Collaborative Health Systems of			Collaborative Health Systems,	,		WellCare Health		
01199WellCare Health Plans	Inc 00000	81-3365375				Maryland, Inc	MD	NIA	LLC	Ownership	50.0	Plans, Inc	N	0
						Collaborative Health Systems of			Collaborative Health Systems,			WellCare Health		
01199WellCare Health Plans	Inc 00000	81-3306594				Virginia, IncCollaborative Health Systems.	VA	NIA	LLC	Ownership	100.0	Plans, Inc WellCare Health	N	0
01199WellCare Health Plans	Inc 00000	90-0779287				III C	NY	NIA	Universal American Corp	Ownership	100.0	Plans. Inc.	N	0
Werroure mourth range	7 1110								Collaborative Health Systems,	0 #1101 3111 p	1	WellCare Health		
01199 WellCare Health Plans	Inc00000	81-2602493				Empire Collaborative Care, LLC	NY	NIA	LLC	Ownership	100.0	Plans, Inc	N	0
		1							Collaborative Health Systems			WellCare Health		
01199WellCare Health Plans	Inc	45 - 4561546				Essential Care Partners, LLC	ТХ	NIA	LLC	Ownership	51.0	Plans, Inc	. N	0
01199WellCare Health Plans	Inc	62-1694548				Golden Triangle Physician	ТХ	NIA	Heritages Health Systems of Texas Inc.	Ownership	100.0	WellCare Health Plans. Inc	N	0
UT199		02 - 1094546				Heritage Health Systems of	Ι Λ	N I A	Texas Tile	Ownersinp	1100.0	WellCare Health		
01199 WellCare Health Plans	Inc	76-0459857				Texas, Inc.	TX	NIA	Heritage Health Systems, Inc.,	Ownership	100.0	Plans, Inc.	N	0
										i i		WellCare Health		
01199WellCare Health Plans	Inc00000	62-1517194				Heritage Health Systems, Inc	ТХ	NIA	Universal American Corp	Ownership	100.0	Plans, Inc	. N	0
01199WellCare Health Plans	Inc	76-0560730				Heritage Physician Networks	TX	NIA	Heritage Health Systems, Inc.,	Ownerchin	100.0	WellCare Health Plans. Inc	N	0
UT199	5 1116	10-0300130				Theritage Filysiciali Networks	/ /		nerrtage nearth systems, filc	Ownersinp	100.0	WellCare Health		
01199WellCare Health Plans	Inc 00000	76-0500964				HHS Texas Management, Inc	GA	NIA	Heritage Health Systems, Inc.,	Ownership	100.0	Plans, Inc	N	0
									,	·		WellCare Health		
01199WellCare Health Plans	Inc00000	76-0500963				HHS Texas Management, LP	GA		Heritage Health Systems, Inc.	Ownership	99 . 1	Plans, Inc	. N	0
01199 WellCare Health Plans	Inc. 00000	47-3923394				Hudson Accountable Care, LLC	NY	NIA	Collaborative Health Systems,	Ownership.	51.0	WellCare Health Plans, Inc.	N	0
oriss	1116	47 -0020004				Maine Primary Care Holdings,			Collaborative Health Systems	Owner 3111 P		WellCare Health		
01199 WellCare Health Plans	Inc 00000	45-4679969				LLC	ME	NIA	LLC	Ownership	97.0	Plans, Inc.	N	0
						Maryland Collaborative Care,			Collaborative Health Systems	·		WellCare Health		
01199WellCare Health Plans	Inc00000	90 - 0855950				LLC	MD	NIA	LLC	Ownership	51.0	Plans, Inc	. N	0
01199WellCare Health Plans	nc00000	81-2704355				Mid-Atlantic Collaborative Care. LLC	MD	NIA	Collaborative Health Systems,	Ownership.	51.0	WellCare Health Plans, Inc.	N	0
Wellcare hearth Flans	· IIIC	01-2704300				Northern Maryland Collaborative	JIIU		Collaborative Health Systems	Ownersiiip		WellCare Health		
01199 WellCare Health Plans	Inc	45-5626871				Care, LLC	MD	NIA	LLC	Ownership	51.0	Plans, Inc.	N	0
]						Universal American Financial	'		WellCare Health		
01199WellCare Health Plans	Inc00000	95-3623226				Penn Marketing America, LLC	DE	NIA	Services	Ownership	100.0	Plans, Inc	. N	0
01199 WellCare Health Plans	nc. 00000	58-2633295				Dromior Marketing Crown 110	DE	NI A	Donn Marketing America 110	Ownership	100.0	WellCare Health Plans. Inc.	N I	
01199WellCare Health Plans		50 -2033295				Premier Marketing Group, LLC	Σ	NIA	Penn Marketing America, LLC Universal American Holdings.	Ownership	100.0	WellCare Health		
01199WellCare Health Plans	Inc	13-3491681				Quincy Coverage Corporation	NY	NIA	LLC	Ownership	100.0	Plans, Inc	N	0

1	2	3	4	5	6	7 Name of Securities	8	9	10	11	12 Type of Control (Ownership,	13	14	15	16
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group		Company	ID	Federal		Traded (U.S. or	Parent, Subsidiaries	Domiciliary	1 1 1 1 3	Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Entity(ies)/Person(s)	(Y/N)	*
01199	WellCare Health Plans Inc.	10768	74-3141949					TX	I A	Heritage Health Systems, Inc.	Ownershin	100 0	WellCare Health Plans, Inc	N	0
01100	morroare nearth rans me	10700	7 4 - 0 14 1040	-			locrectoare nearth rians, me			The reade rear throughtenis, me.	0#1101 3111 p	100.0	WellCare Health		
01199	WellCare Health Plans Inc	10096	62-1819658				SelectCare of Texas, Inc	TX	IA	Heritage Health Systems, Inc.,	Ownership	100.0	Plans, Inc.	N	0
										Universal American Financial			WellCare Health		
01199	WellCare Health Plans Inc	00000	42-0989096				UAM Agent Services Corp	I A	NIA	Services	Ownership	100.0		N	0
01199	WellCare Health Plans Inc.	00000	26-0153605				UAM/APS Holding Corp	DE	NIA	APS Parent, Inc	Ownership	100.0	WellCare Health Plans, Inc	l N	0
01199			20-0133003	-			TOAM/AFS HOTATING COTP		N I A	The WellCare Management	Owner Sirip	100.0	WellCare Health	JN	
01199	WellCare Health Plans Inc.	00000	27 - 4683816				Universal American Corp.	DE	NIA	Group, Inc.	Ownership.	100.0	Plans, Inc.	N	0
							Universal American Financial			Universal American Holdings,	·		WellCare Health		
01199	WellCare Health Plans Inc	00000	95-3800329				Services	DE	NIA	LLC	Ownership	100 . 0	Plans, Inc	N	0
01199	WellCare Health Plans Inc.	00000	45-1352914				Universal American Holdings,	DF	NIA	Universal American Corp	Ownership	100.0	WellCare Health Plans. Inc.	l N	0
01199			43-1332314	-			Virginia Collaborative Care.		N 1 A	Collaborative Health Systems	Owner Sirip	100.0	WellCare Health	JN	
01199	WellCare Health Plans Inc.	00000	45-5439406				LLC	VA	NIA	LLC	Ownership	51.0	Plans, Inc	N	0
							Worlco Management Services,				·		WellCare Health		
01199	WellCare Health Plans Inc	. 00000	23 - 1913528	.			Inc	NY	NIA	Worlco Management Services	Ownership	100 . 0	Plans, Inc	N	0
01199	WellCare Health Plans Inc	00000	47 - 2346408				AWC of Syracuse, Inc	NY	NIA	Collaborative Health Systems	Ownership	100.0	WellCare Health Plans. Inc	l N	0
01199	werrcare nearth Frans Inc		47 -2340400	-			WellCare Health Plans of		N I A	The WellCare Management	ownership	100.0	WellCare Health	JN	
01199	WellCare Health Plans Inc.	16253	82-3169616				Arizona. Inc.	AZ	lIA	Group. Inc.	Ownership.	100.0	Plans. Inc.	N	0
							,			The WellCare Management	·		WellCare Health		
01199	WellCare Health Plans Inc	16344	82-3114517				WellCare of Maine, Inc	ME	IA	Group, Inc.	Ownership	100.0		N	0
01199	WellCare Health Plans Inc	00000	66-0888149				 WellCare of Puerto Rico. Inc	PR	IA	The WellCare Management	Ownorshin	100.0	WellCare Health Plans. Inc	l N	0
01199	wellcare nearth Flans Inc		00-0000149	-			WellCare Associate Assistance	PK	I A	The WellCare Management	Ownership	100.0	WellCare Health	JN	
01199	WellCare Health Plans Inc	00000	82-4598040				Fund, Inc	FL	NIA	Group. Inc.	Ownership	100.0	Plans. Inc.	N	0
							WellCare Health Insurance			The WellCare Management	, , , , , , , , , , , , , , , , , , , ,		WellCare Health		
01199	WellCare Health Plans Inc	16343	82-4247084				Company of America	AR	I A	Group, Inc.	Ownership	100.0	Plans, Inc	N	0
01199	 WellCare Health Plans Inc.	16342	82-5127096				WellCare National Health Insurance Company	TX	IA	The WellCare Management Group, Inc.	Ownership.	100.0	WellCare Health Plans, Inc.	l N	0
01199	Wellcare nearth Flans Inc	10342	02-012/090	-			WellCare of North Carolina.	/ A	I A	The WellCare Management	owner sirrp	100.0	WellCare Health	JJN	
01199	WellCare Health Plans Inc	16547	82-5488080				Inc.	NC	IA	Group, Inc.	Ownership	100.0	Plans, Inc.	N	0
							Meridian Management Company,			The WellCare Management	,		WellCare Health		
01199	WellCare Health Plans Inc	. 00000	26-4004494				LLC	MI	NIA	Group, Inc.	Ownership	100.0	Plans, Inc	N	0
01199	WellCare Health Plans Inc.	00000	26-4004494				 Meridian Network Services, LLC	MI	NIA	Meridian Management Company,	Ownership	100.0	WellCare Health Plans, Inc.	NI NI	_
01199	METIOATE NEATH PTAIS INC 		20-4004494	-			WellCare of Michigan Holding		IN I A	The WellCare Management	ownersinp	100.0	WellCare Health	N	
01199	WellCare Health Plans Inc.	00000	26-4004578	<u> </u>			Company	М I	NIA	Group, Inc.	Ownership	100.0	Plans, Inc.	N.	0
							Maryland Collaborative Care						·		
	l						Transformation Organization,			The WellCare Management			WellCare Health		
01199	WellCare Health Plans Inc	00000	82-1280079	-			Inc Meridian Health Plan of	DE	NIA	Group, Inc	Ownership	100.0	Plans, Inc	N	0
01199	WellCare Health Plans Inc.	13189	20-3209671				Meridian Health Plan of	I 11	IA	WellCare of Michigan Holding Company	Ownership.	100 0	WellCare Health Plans. Inc.	N	ا ۱
01100	וווס ווסמונוו דומווס וווט		ZU-JZUJUI I	-			Meridian Health Plan of			WellCare of Michigan Holding	οπιιστοιτιμ	100.0	WellCare Health	JJN	
01199	WellCare Health Plans Inc.	52563	38-3253977				Michigan, Inc.	MI	I A	Company	Ownership.	100.0	Plans, Inc.	lN	0

									1 10		1 40	10	1	1	
1	2	3	4	5	6	7 Name of	8	9	10	11	12 Type of Control	13	14	15	16
						Securities					(Ownership.				
						Exchange if			Relationship		Board.	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group		Company	ID	Federal		Traded (U.S. or	Parent, Subsidiaries	Domiciliary	1	Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	Location	Entity	(Name of Entity/Person)		Percentage	Entity(ies)/Person(s)	(Y/N)	*
										The WellCare Management			WellCare Health		
01199	WellCare Health Plans Inc	16571	83-2069308				WellCare of Washington, Inc	WA	I A	Group, Inc.	Ownership	100.0	Plans, Inc	N	0
04400	W 110 11 111 B1	00000	07 4000004				W			The WellCare Management		400.0	WellCare Health		
01199	WellCare Health Plans Inc	00000	27 - 1339224	-			MeridianRx, LLC	MI	NIA	Group, Inc	Ownership	100.0	Plans, Inc.	N	0
01199	 WellCare Health Plans Inc	00000	32-0408908				MeridianRX IPA. LLC	NY	NIA	MeridianRX, LLC	Ownership	100.0	WellCare Health	N N	0
01199	l well cale health Flans IIIc	00000	32-0400900	-			WellCare Health Insurance of	JNT		The WellCare Management	. ownersirip	100.0	WellCare Health	JN	U
01199	WellCare Health Plans Inc.	16513	83-2126269				Connecticut, Inc.	CT	IA	Group, Inc.	Ownership.	100 0	Plans. Inc.	N	0
01100	morroaro noarth rano mo	10010	00 2120200				WellCare Health Insurance of			The WellCare Management	0 milor oirip		WellCare Health	,	
01199	WellCare Health Plans Inc.	16532	83-2276159				Tennessee, Inc.	TN	IA	Group, Inc.	Ownership	100.0	Plans, Inc.	N	0
							WellCare Health Plans of			The WellCare Management			WellCare Health		
01199	WellCare Health Plans Inc	16514	83-2255514				Vermont, Inc	VT		Group, Inc	Ownership	100.0	Plans, Inc	N	0
										The WellCare Management			WellCare Health		
01199	WellCare Health Plans Inc	16531	83-2797833				WellCare of Arkansas, Inc	AR	I A	Group, Inc.	Ownership	100.0	Plans, Inc	N	0
01199	 WellCare Health Plans Inc.	00000	83-2840051				WellCare of Indiana. Inc.	IN	IA	The WellCare Management	Ownership	100.0	WellCare Health Plans. Inc.	N.	0
01199	lwerrcare nearth Frans Inc	00000	03-2040031	-			werrcare or murana, mc	IIN	I A	Group, IncThe WellCare Management	ownership	100.0	WellCare Health	JN	
01199	 WellCare Health Plans Inc	16515	83-2914327					NH	I A	Group. Inc	Ownership	100.0	Plans. Inc.	N	0
01100	merroare nearth rrans me	10010	00-2014027				merioare or new maniparitie, me			Oτοαρ', 1110	0 WINGT 3111 P		WellCare Health		
01199	WellCare Health Plans Inc	00000	83-3612209				MeridianRx of Indiana, LLC	IN	NIA	MeridianRX, LLC	Ownership	100.0	Plans. Inc.	N	0
							WellCare Health Insurance			The WellCare Management			WellCare Health		
01199	WellCare Health Plans Inc	00000	83-3333918				Company of Louisiana, Inc	LA	I A	Group, Inc	Ownership	100.0	Plans, Inc	N	0
							WellCare Health Insurance			The WellCare Management			WellCare Health		
01199	WellCare Health Plans Inc	16516	83-3091673				Company of New Hampshire, Inc	NH	I A	Group, Inc.	Ownership	100.0	Plans, Inc	N	0
04400	WallCare Haalth Dlage Inc	10570	83-3166908				WellCare Health Insurance	WA	l IA	The WellCare Management	O	100.0	WellCare Health	N.	0
01199	WellCare Health Plans Inc	16570	83-3100908	-			Company of Washington, Inc WellCare Health Insurance	WA	I A	Group, IncThe WellCare Management	Ownership	100.0	Plans, Inc WellCare Health	JN	
01199	 WellCare Health Plans Inc	16568	83-3310218				Company of Wisconsin. Inc	w ı	I A	Group. Inc	Ownership	100.0	Plans, Inc	N	0
01100	Worroard Hoarth Francis Hio	10000	00 0010210				WellCare Health Insurance of			The WellCare Management	0 #1101 0111 p		WellCare Health		
01199	WellCare Health Plans Inc.	16548	83-3493160				North Carolina, Inc.	NC	IA	Group. Inc.	Ownership	100.0	Plans, Inc.	N	0
							WellCare Health Plans of		1	The WellCare Management			WellCare Health		
01199	WellCare Health Plans Inc	16569	83-3351254	.			Wisconsin, Inc.	WI	I A	Group. Inc.	Ownership	100.0	Plans, Inc	JN	0
04400	Wall Care Hard the Diana	40540	00 0505000				WellCare of Missouri Health		1	The WellCare Management	0	400.0	WellCare Health		
01199	WellCare Health Plans Inc	16512	83-3525830	-[Insurance Company, Inc Accountable Care Coalition of	MO	I A	Group, IncThe WellCare Management	Ownership	1	Plans, Inc.	N	0
01199	 WellCare Health Plans Inc	00000	84-2217098				Florida Partners, LLC	FL	N I A	Group, Inc.	Ownership	100.0	WellCare Health Plans, Inc	NI NI	
01199	l metroare nearth Frans inc	00000	04-2217030				Accountable Care Coalition	J L		The WellCare Management	Ownerstrip	100.0	WellCare Health	JN	
01199	WellCare Health Plans Inc.	00000	84-2574901				Direct Contracting, LLC	FL	NIA	Group, Inc.	Ownership.	100 0	Plans. Inc.	N	0
1100	and the final trains the trains						WellCare Health Insurance			The WellCare Management	or orrip		WellCare Health		
01199	WellCare Health Plans Inc	00000	84-3731013				Company of Nevada, Inc.	NV	IA	Group. Inc.	Ownership	100.0	Plans, Inc.	N	0
							WellCare Health Insurance of			The WellCare Management			WellCare Health		
01199	WellCare Health Plans Inc	00000	84-3739752	.[the Southwest, Inc	AZ		Group. Inc.	Ownership	100.0	Plans, Inc	N	0
04466	W 110 11 111 51 1	00000	04.0547000				WellCare Health Plans of		[The WellCare Management		400 -	WellCare Health		
01199	WellCare Health Plans Inc	00000	84-3547689	-			Massachusetts, Inc	MA	I A	Group, Inc	Ownership	100.0	Plans, Inc	N	0
01199	 WellCare Health Plans Inc	00000	84-3907795				WellCare Health Plans of Missouri, Inc.	MO	I A	The WellCare Management Group. Inc.	Ownership.	100.0	WellCare Health Plans, Inc	N1	0
01199	merioare nearth Frans Inc	00000	04-0901190				MII 990011, 1116	∪IV[στουμ, της	Towner 2016	1		N	U

Asterisk	Explanation
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SCHEDULE Y

PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
						Income/						
					Purchases, Sales or							Reinsurance
					Exchanges of	Incurred in						Recoverable/
					Loans, Securities,	Connection with		Income/		Any Other Material		(Payable) on
					Real	Guarantees or		(Disbursements)		Activity Not in the		Losses and/or
NAIC				0 " 1		Undertakings for the		Incurred Under		Ordinary Course of		Reserve
Company	ID	Name of the control of the first of the firs	Shareholder	Capital	Loans or Other	Benefit of any	Agreements and	Reinsurance	*	the Insurer's	T. (.).	Credit
Code 00000	Number 59-3547616	Names of Insurers and Parent, Subsidiaries or Affiliates Comprehensive Health Management. Inc.	Dividends	Contributions	Investments	Affiliate(s)	Service Contracts 1.989.891.418	Agreements		Business	Totals 1.989.891.418	Taken/(Liability)
							435,357,872		·····	†	435 , 357 , 872	
00000		Meridian Management Company LLCExactus Pharmacy Solutions, Inc			·		(31, 123, 933)		·····	 	(31, 123, 933)	
95081	59-2583622	IWellCare of Florida. Inc.	(138, 132, 011)				(51, 123, 933)		·····	 	(668,621,800)	
95334	14-1676443	WellCare of New York, Inc.	(130,132,011)				(95,849,839)				(95,849,839)	
95310	06-1405640	WellCare of Connecticut. Inc.					(12,736,225)				(95,649,639)	
11229	36-4050495	Harmony Health Plan of Illinois, Inc.	(195,000,000)		†		(106,336,512)		·····	†	(301,336,512)	
10760	20-2103320	WellCare of Georgia, Inc	(85,000,000)		†		(213,927,387)		ļ	†	(298,927,387)	
10155	20-2383134	WellCare Prescription Insurance, Inc	(00,000,000)		†		(114,849,792)		†	†	(296,927,367)	
12749	20-3562146	WellCare of Ohio, Inc	(10,000,000)		†		(114,040,782)		·····	†	(114,049,792)	
83445	86-0269558	WellCare Health Insurance of AZ, Inc	(10,000,000)	15,000,000	<u> </u>		(89, 935, 833)		†·····	†····	(74,935,833)	
64467	36-6069295	WellCare Health Insurance of IL, Inc.	(140.000.000)	10,000,000			(254, 264, 820)	(19,530)		İ	(394.284.350)	(4.762)
10884	11-3197523	WellCare Health Insurance of NY, Inc.	(140,000,000)				(140,605)	(10,000)			(140,605)	(4,702)
13020	20-8017319	WellCare Health Plans of NJ, Inc.		15,000,000		• • • • • • • • • • • • • • • • • • • •	(101,095,378)	• • • • • • • • • • • • • • • • • • • •		T	(86,095,378)	
12964	20-8058761	WellCare of Texas. Inc.	(32.000.000)			•	(40,109,113)	19.530		İ	(72,089,583)	4.762
11775		WellCare of South Carolina, Inc.	(10,000,000)			•	(36,885,185)				(46,885,185)	1,702
16533	45-5154364	WellCare Health Plans of Tennessee, Inc.	(10,000,000)	918, 171			(00,000,100)				918,171	
00000		WellCare of California Inc.	(12,000,000)				(37,004,253)				(49,004,253)	
12913	20-5862801	Missouri Care, Incorporated	(8,250,000)				(82,172,995)				(90,422,995)	
15951	47 - 5456872	WellCare of Nebraska, Inc.					(36.414.965)				(36,414,965)	
00000	57 - 1165217	Care1st Health Plan Árizona, Inc.					(60,312,326)				(60,312,326)	
00000	06 - 1742685	ONECare by Care1st Health Plan AZ. Inc.	(5,000,000)				(608.881)		<u> </u>		(5,608,881)	
80624	13-1851754	American Progressive L&H Ins. Co. of NY	(11,980,373)				(49,700,577)		<u> </u>		(61,680,950)	
10096	62-1819658	SelectCare of Texas, Inc	(45,000,000)				(74,030,923)				(119,030,923)	
10768	74-3141949	SelectCare Health Plans, Inc.					(1,868,732)		<u> </u>		(1,868,732)	
16239	82-1301128	WellCare of Alabama		1,200,000			(23,358)				1, 176, 642	
16253	82-3169616	WellCare Health Plans of Arizona Inc					(1,606,441)				(1,606,441)	
16343	82-4247084	WellCare Health Ins. Co. of America		1,000,000			(75,767)		ļ		924 , 233	
16342	82-5127096	WellCare National Health Insurance Co		2,000,000					ļ		2,000,000	
16344 52563	82-3114517	Wellcare of Maine					(3,055,359)		ļ		(3,055,359)	
52563	38-3253977	Meridian Health Plan of Michigan Inc		75,000,000	ļ		(557,824,519)		ļ	ļ	(482,824,519)	
13189	20-3209671	Meridian Health Plan of Illinois Inc		300,000,000			(966,214,441)		ļ	ļ	(666,214,441)	
00000	83-3333918	WellCare Health Insurance Co. of LA Inc		3, 124, 164	ļ				ļ	ļ	3 , 124 , 164	
16571	83-2069308	WellCare of Washington Inc.		3,750,000					ļ		3,750,000	
16570	83 - 3166908	WellCare Health Ins. Co. of WA Inc		4,750,000					ļ		4,750,000	
16531	83-2797833	WellCare of Arkansas Inc.		621,642	ļ				ļ	ļ	621,642	
16513	83-2126269	WellCare Health Insurance of CT Inc.		1,200,000	ļ				ļ	ļ	1,200,000	
16512	83-3525830	WellCare of MI Health Ins. Co. Inc	 	3,617,256	ļ				ļ	 	3,617,256	
16515	83-2914327	WellCare of New Hampshire Inc		11,205,914	ļ				ļ	ļ	11,205,914	
16516	83-3091673	WellCare Health Insurance Co. of NH Inc		3,500,000	ļ				ļ	 	3,500,000	
16547		WellCare of North Carolina Inc	ļ	137,118,978	ļ				ļ	 	137, 118, 978	
16548		WellCare Health Insurance of NC Inc		4,922,954					ļ	 	4,922,954	
16532	83-2126269	WellCare Health Insurance of TN Inc.	1	973,339	L	l			L	1	973,339	

SCHEDULE Y

PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent. Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	J	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
16514	83-2255514	WellCare Health Plans of Vermont Inc.		322,827					ļ		322,827	
16569	83-3351254 83-3310218 84-3739752 27-1339224	WellCare Health Plans of Wisconsin Inc		1 , 125 ,000					ļ		1,125,000	
16568	83-3310218	WellCare Health Insurance Co. of WI Inc		2,000,000					ļ		L2.000.000 L	
00000	84-3739752	TwellCare Health Ins. of the SW Inc.		600,000					1		600.000 L	
00000	27 - 1339224	Meridian Rx LLC.	(50,000,000) 742,362,384				1,073,408,658		1		1,023,408,658	
00000	14-1647239	Meridian Rx LLC The WellCare Management Group, Inc	742 362 384	(588,950,245)			, , , , , , , , , , , , , , , , , , , ,		T		153,412,139	
]							T	T		
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SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

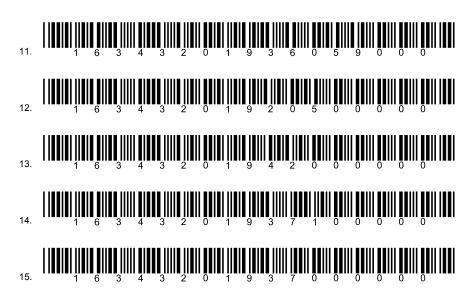
The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of **WAIVED** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

	0 7 4	
	MARCH FILING	Responses
1.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
2.	Will an actuarial opinion be filed by March 1?	YES
3.	Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES
4.	Will the confidential Risk-based Capital Report be filed with the state of domicile, if required by March 1?	YES
	APRIL FILING	
5.	Will Management's Discussion and Analysis be filed by April 1?	YES
6.	Will the Supplemental Investment Risks Interrogatories be filed by April 1?	YES
7.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	YES
	JUNE FILING	
8.	Will an audited financial report be filed by June 1?	YES
9.	Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES
	AUGUST FILING	
10.	Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1?	YES.
owev terro	llowing supplemental reports are required to be filed as part of your statement filing if your company is engaged in the type of business cover, in the event that your company does not transact the type of business for which the special report must be filed, your response congatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your comparer reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions.	of NO to the specific
	MARCH FILING	

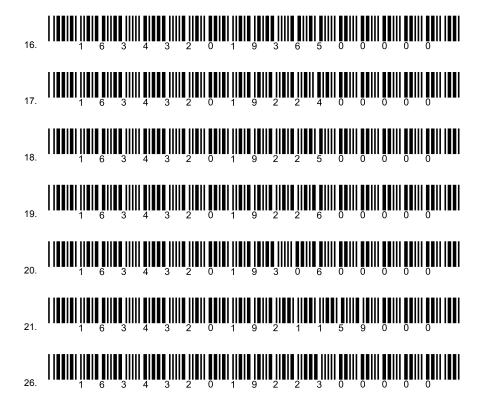
Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	N0					
Will the Supplemental Life data due March 1 be filed with the state of domicile and the NAIC?	N0					
Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	N0					
Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 on Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1?	N0					
Will the actuarial opinion on non-guaranteed elements as required in Interrogatory 3 to Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1?	N0					
Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	N0					
Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	N0					
Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	N0					
Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed with electronically with the NAIC by March 1?	N0					
APRIL FILING						
Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	N0					
Will the Supplemental Life data due April 1 be filed with the state of domicile and the NAIC?	N0					
Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	YES					
Will the regulator only (non-public) Supplemental Health Care Exhibit's Allocation Report be filed with the state of domicile and the NAIC by April 1?	YES					
Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1?	YES					
Will the Adjustments to the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit (if required) be filed with the state of domicile and the NAIC by April 1?	YES					
AUGUST FILING						
Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	NO					
	Will the Supplemental Life data due March 1 be filed with the state of domicile and the NAIC? Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 on Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1? Will the actuarial opinion on non-guaranteed elements as required in Interrogatory 3 to Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1? Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1? Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1? Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1? Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed with electronically with the NAIC by March 1? APRIL FILING Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1? Will the Supplemental Life data due April 1 be filed with the state of domicile and the NAIC? Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1? Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit (if required) be filed with the state of domicile and the NAIC by April 1? Will the Adjustments to the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit (if required) be filed with the state of domicile and the NAIC by April 1?					

Explanation:

Bar code:



SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES



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